

Valley Auto Group

105 East 7th Street Suite 100

Pennsburg, PA 18073

215-541-0680

Cell 267-733-7073

Preventive Maintenance Checklist

(Check off your responses)

Name: _____

Model: _____ Mileage: _____

Year: _____ VIN: _____

1. Do you want us to keep you informed on the Preventive Maintenance suggested for your car by the factory? ___ YES ___ NO

2. Please check the most important benefits you want from your car.

_____ Maintain performance & handling

_____ Safety & Reliability

_____ Not having to bring your car in for repairs (convenience)

_____ Just getting to your destination

_____ Feeling & looking good when you drive

3. Have you had your transmission serviced? ___ YES ___ NO

If yes, how long ago? _____

4. Have you had your cooling system serviced? ___ YES ___ NO

If yes, how long ago? _____

5. Does your vehicle ever experience a rough idle, hesitation or stall out? ___ YES ___ NO

If yes, when does it occur? _____

6. Have you had your fuel and air induction system serviced? ___ YES ___ NO

If yes, how long ago? _____

7. Do you have a problem with noisy power steering? ___ YES ___ NO

8. Have you had your power steering serviced? ___ YES ___ NO

If yes, how long ago? _____

9. Have you noticed a foul odor in your air conditioning vents or excessive noise when the air conditioner is on? ___ YES ___ NO

If yes, please describe: _____

10. Do you have a problem with brake noise? ___ YES ___ NO

If yes, please describe: _____

11. Have you had your engine crankcase flushed? ___ YES ___ NO

If yes, how long ago? _____